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PATENT APPLICATION FEE DETERMINATION Appl								ation or Number	Filing Date:				
RECORD 109								11912 02/23/20		0		To be Mailed	
Substitute for Form P10-8/5													
APPLICATION AS FILED – PART I												ER THAN	
(Column 1) (Column 2)							_	SMALL		OR		L ENTITY	
FOR			NUMBER	FILED	NUMBER EXT	TRA	]	RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
BASIC FEE (37 CFR 1.16(a), (b), or (c))			N/A	`	N/A		]	N/A			N/A	L	
SEARCH FEE (37 CFR 1.16(k), (i), or (m))			N/A		N/A		]	N/A			N/A		
EXAMINATION FEE (37 CFR 1.16(o), (p), or (q))			N/A		N/A		]	N/A			N/A		
TOTAL CLAIMS (37 CFR 1.16(i))			minus 20 =		*		]	X \$25 =		OR	x \$50 =		
INDE	PENDENT CLAIM	s	minus 3 =		*		1	X \$100 =	<del>                                     </del>	1	X \$200 =		
(37 Ur	FR 1.16(h))	$\longrightarrow$	If the specification and drawings exce			≏ed	<b>1</b>	A 4.0.		-	7 4233		
l			100 sheets of paper, the application size			size			,				
☐APPLICATION SIZE FEE (37 CFR 1.16(s))			fee due is \$250 (\$125 for small entity for each additional 50 sheets or fractional 50 sheets or fractions.)										
			thereof. See 35 U.S.C. 41(a)(1)(G) an			nd							
	37 CFR 1.16(s).						1	+ \$180		1	+\$360		
$\vdash$	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))  * If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL		1	TOTAL		
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	APPL	ICATION A	AS AMENDE	ED – PAR	ГΙΙ						27.11		
		(Column 1	41	(Column 2	2) (Columi	- 31		CMAI	L ENTITY	OR		ER THAN L ENTITY	
<del>                                     </del>		CLAIMS			<u> </u>	II oj	1	SIVIAL	LENIIII	UK	SIVI	L ENIII i	
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AMENDMENT A	Total (37 CFR 1.16(i))	* <b>42</b>	Minus	<b>**</b> 72	= 0			X \$25 =		OR	X \$50=		
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Ř	Application Size Fee (37 CFR 1.16(s))												
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))						]			OR			
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	(Column 1) (Column 2) (Column 3)												
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₹	Application Size Fee (37 CFR 1.16(s))									Į			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR			
CALCULATE								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									Legal Instrument Examiner:				
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". Veronica Day-Everett											•		
*** If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1													

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